

Town of Groton Mechanical Permit Application

(Heating, Air-Conditioning, Duct Work, Gas Piping, etc.)

Return to: **Construction Services** 134 Groton Long Point Road Groton, CT 06340-4873 Phone: (860) 446-5982

Fax: (860) 448-4094

Permit No	(Fo	(For Office Use Only)		
Fees: Mechanical:			Total:	
☐ Residential Property	☐ Commercial Prop	perty	☐ New Building	☐ Existing Building
Value of Project (Cost of M	faterials and Labor):			<u> </u>
Property Location (Street A	Address):			
Owner(s) Name (as it appear	ars in Land Records)			
Mailing Address:	_		Tele	phone:
Town:	State	Zip_	E-mail:	
Contractor:		Comp	oany Name:	
Mailing Address:	Telephone:			
Town:	State	Zip	E-mail:	
Description of Proposed W	Vork:			
Type of Heating System:	\square NEW \square R	REPLACE	MENT	
☐ Hot Water	☐ Steam ☐ F	Forced Air	☐ Electric	
Boiler or Furnace - Make,	, Model, & BTU Rating:_		☐ Gas Fired	\square Oil Fired \square Other
Radiation Make, Model an	nd Net Rating BTU/HR:			
☐ Chimney Flue Size:	□ Type:		_ □ Water Heater	☐ Domestic Coil Boiler
OIL TANK SIZE	LOCATION:		☐ Inside	☐ Outside
work is authorized by the	owner of record and/or I lands from to all applicable law	have been /s, codes, i	authorized to make this regulations and ordinan	property, or that the proposed application as an authorized aces. All information contained
PRINT NAME			Telephone	Contractor's License #
SIGNATURE in Ink of Owner or Authorized Agent				Application Date
	Building Official			pleted Application Date